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The Institute of Medical Ethics is an independent, non-partisan organisation for the multidisciplinary study of medico-moral issues raised by the practice of medicine, and concerned with research, education and information. It is financed by grants and donations from public and private sources.

The institute aims to help improve the quality of both professional and public discussion of medico-moral questions; to promote the study of medical ethics; to promote high academic standards for this ever developing subject; to encourage a multidisciplinary approach to discussion of the consequences of clinical practice; to stimulate research into specific problems, and to remain non-partisan and independent of all interest groups and lobbies.

Institute reports include: *The Ethics of Resource Allocation in Health Care* by Kenneth Boyd, and *Dilemmas of Dying* by Ian Thompson, Edinburgh University Press (both 1979); *Medical Research with Children: Ethics, Law and Practice* by Richard Nicholson, and *Lives in the Balance: the Ethics of Using Animals in Biomedical Medical Research* by Jane Smith and Kenneth Boyd, Oxford University Press (1986 and 1991); *Life Before Birth* by Kenneth Boyd, Brendan Callaghan and Edward Shotter, SPCK (1986); *Teaching and Learning Nursing Ethics* by Ursula Gallagher and Kenneth Boyd, Scutari (1991) and Sorbona Milan (1993); *The Pond Report on the Teaching of Medical Ethics* edited by Kenneth Boyd, and *The Care of Patients with HIV and AIDS: A Survey of Nurse Education in the UK*, by Hazel McHaffie, published directly for the institute (1987 and 1994); *Life, Death and Decisions: Doctors and Nurses Reflect on Neonatal Practice*, by Hazel McHaffie and Peter Fowlie, published by Hochland and Hochland (1996).

Shorter institute reports include: *Assisted Death*, *Lancet*, 1990; *AIDS, ethics and clinical trials*, *British Medical Journal*, 1992; *AIDS and the ethics of medical care and treatment*, *Quarterly Journal of Medicine*, 1992; *Advance directives: partnership and practicalities*, *British Journal of General Practice*, 1993; *Implications of HIV infection and AIDS for medical education*, *Medical Education*, 1994; and *Prolonging life and allowing death: infants*, *Journal of Medical Ethics*, 1995.

The institute derives from the London Medical Group, a student group for the study of ethical issues raised by the practice of medicine which, beginning in 1963, arranged a comprehensive programme of lectures and symposia on such issues. Similar groups associated with the institute are now established in university teaching hospitals throughout the UK.

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# The journal of the Institute of Medical Ethics

The *Journal of Medical Ethics* was established in 1975, with a multidisciplinary editorial board, to promote the study of contemporary medico-moral problems. The editorial board has as its aims the encouragement of a high academic standard for this ever-developing subject and the enhancement of professional and public discussion. The journal is published six times a year and includes papers on all aspects of health care ethics, analyses ethical concepts and theories and features case conferences and comment on clinical practice. Intermittent series focus on the **Teaching of medical ethics**; on the medico-moral problems directly experienced by health care workers (**At the coalface**); on the pursuit of arguments prompted by papers in the journal (**Debate**); on medical ethics in literature (**Medical ethics and literature**); and on briefly argued often unorthodox opinions related to medical ethics (**Point of view**). The journal also contains book reviews and letters. For submissions, see **Notice to contributors**.

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## News and notes

### Ethics and genetics

Ethics and Genetics: Advanced European Bioethics Course, is the title of a course which will take place from 20-22 November 1997, in Nijmegen, the Netherlands. Specialists from various countries will discuss ethical aspects of genetics. Subjects will include Ethics and the Human Genome Project; Genetic counselling; Genetic screening; Human gene therapy, and Geneticization.

Lecturers will be: E Meslin (USA), P Schotsman

(Belgium), R Chadwick (UK), D Gracia (Spain), H ten Have (Netherlands). All lectures and plenary sessions will be held in English. For more information please contact: B Gordijn, PhD, Catholic University Nijmegen, 232 Dept of Ethics, Philosophy and History of Medicine, PO Box 9101, 6500 HB Nijmegen. Tel: 0031-24-3615320. Fax: 0031-24-3540254. E-mail: b.gordijn@efg.kun.nl. Internet site: <http://www.azn.nl/fmw/news.htm>

you will probably only be able to rescue one of them. Who should you attempt to rescue first?

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## News and notes

### Medical Ethics at the end of the 20th Century

The Ministry of Science in Israel is to sponsor an international conference on Medical Ethics at the Close of the 20th Century. The conference will be held at The Van Leer Jerusalem Institute, 5–8 January 1998, Israel.

Speakers will include: Baruch Brody, Baylor College of Medicine; Tom Beauchamp, Georgetown; Raphael Cohen-Almagor, Haifa; Bernard Dickens, Toronto; Justice Dalya Dorner, The Supreme Court of Israel; Shimon Glick, Ben-Gurion; John Harris, Manchester; Govert den Hartogh, Amsterdam; Jan C Joerden, Europa-Universitat Viadrina; Eike-Henner Kluge,

Victoria; John Lantos, Chicago; Evert van Leeuwen, Vrije; Frederick Lowy, Concordia; John Robertson, Texas; Charles Sprung, Jerusalem; Avraham Steinberg, Jerusalem; Antonella Surbone, Memorial Sloan-Kettering Cancer Center, and Robert D Truog, Harvard.

For more information please contact Ms Beki Shimoni, Head, Conference Unit, The Israeli Ministry of Science, Building C, PO Box 18195, Jerusalem 91181, Israel. Fax: 972-2-5824022. Phone: 972-2-5811220; 5847783.

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## News and notes

### Obstetrics and gynaecology

The 28th British Congress of Obstetrics and Gynaecology (BCOG) will take place from 30 June–3 July 1998 at the Harrogate International Centre, UK. Further information is available from the

BCOG Secretariat, Congress House, 65 West Drive, Cheam, Sutton, Surrey SM2 7NG, UK. Tel: +44 (0)181 661 0877. Fax: +44 (0)181 661 9036.

degree and diploma nurse students and medical students. The majority of professional nurses will easily relate to the all too common stories highlighting a variety of ethical dilemmas which are introduced in the text. These, the reader will find, are of equal relevance to all health care professionals in the light of current health care practices.

The main tool used to engage the reader incorporates a process of clinically focused reflection and discussion. The primary intended outcomes of these exercises appear to be to develop and focus the understanding and awareness of professional nurses regarding the everyday ethical issues and dilemmas that arise from clinical nursing practice. Kohner manages this using a non-confrontational approach which should appeal to many readers.

Clinical stories are presented, followed by suggested discussion points. These allow the participants to explore issues arising from the story and enable them to reflect on the ethical dilemmas which are the key to each story. Nurses are likely to find themselves stimulated by the debate and discussion originating from these everyday nursing situations.

The stories are centred around common key areas of professional nursing practice:

- Accepting and respecting the individuality and autonomy of the patient or client
- The nurse-family relationship
- The role and responsibilities of the nurse.

Each of these key areas comprises a selection of stories that cover a variety of clinically based scenarios in the community and in hospitals, encompassing incidents from across the spectrum of critical, acute and long term care of patients and their families. The dilemmas for nurses in similar clinical situations, together with the relevant ethics can be identified

from the discussion that ensues.

Many nurses will relate their discussions to their personal practice, while being able at the same time to acknowledge the relevance of their discussion to differing areas of clinical practice, recognising that the principles involved cross the inter-professional boundaries and disciplines.

The text does not provide a theoretical background to ethical principles and issues that arise from the theory. This could be a potential weakness for readers with little or no ethical background, but this does not detract from the original intention of being a catalyst for promoting reflection and discussion and should not put off potential readers.

Short commentaries complete each section. This enables the recognition of common strands between each area, together with the underpinning ethical dilemmas raised by the stories. These commentaries will be extremely helpful to those who lack a background in ethics, and enable the reader to identify simple ethical principles (while simultaneously providing directions for limited further reading for captivated participants). This section does a great deal to rectify the main weakness of the book previously identified.

The focus of this self-directed approach is to encourage professional nurses to be increasingly aware of, and to utilise, ethical principles in underpinning and developing their personal and professional practice. To this end the penultimate section suggests key factors, derived from the stories, which are recognised by the author as being essential in the development of an ethically based practice.

The final section of this book encourages readers to develop their awareness further. Useful suggestions on how to develop small discussion groups to continue the process of reflection are provided, together with selected exercises. The latter are primarily focused on increasing

self-awareness regarding personal and professional values and roles while simultaneously developing communication skills.

This book is highly readable. I can imagine nurses using it as a focus for clinically based discussion at ward and unit level as well as on an individual basis. The issues arising from the stories will reflect many clinical situations experienced by nurses in their everyday clinical practice. This should assist in the identification of the appropriate ethical dilemmas arising from given situations, while providing a stimulus for further debate. This enables the reader to develop personal awareness regarding the ethical underpinning of professional practice and will encourage health care professionals to continue to develop their personal and professional practice based on appropriate ethical principles.

SIMON CHIPPENDALE

*Marie Curie Lecturer,  
Warren Pearl Marie Curie Centre,  
and Honorary Clinical Lecturer,  
Department of Nursing,  
University of Birmingham*

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## Submitting manuscripts for publication

Four copies of papers submitted for publication should be sent to: The Editor, *Journal of Medical Ethics*, Analytic Ethics Unit, Imperial College of Science, Technology and Medicine, London SW7 2AZ. The journal considers papers only if they are not under consideration by any other journal at the same time. Rejected manuscripts are not returned. Papers, including references, should be in double-spaced typewriting on one side of the paper only. A total word-count is required, and pages should be numbered sequentially. On a separate sheet brief details of the author's present post, an address for readers' correspondence and any other relevant information should be supplied.

The *JME* uses a simplified 'Vancouver style' for references. The full text of the 'Vancouver Agreement' was published in the *British Medical Journal* in 1991; 302; 338-41. As the 'Vancouver style' is incompatible with the long established style of references for legal articles, lawyers should use their own standard style, but avoid abbreviations so as to facilitate reference by others. The journal is multidisciplinary and **papers should be in clear jargon-free English, accessible to any intelligent reader.**

Authors are asked to avoid footnotes. The preferred maximum length of papers is 3,500 words – absolute maximum 5,500 (including references). Book reviews should be between 600 and 1,000 words. Abbreviations should be avoided. The names of journals, organisations etc should be given in full in the text.

**Two copies of the journal will be sent to authors free of charge after their papers are published. Offprints of individual papers may be bought from The Publisher, Journal of Medical Ethics, BMJ Publishing Dept, BMA House, Tavistock Square, London WC1H 9JR.**

## Simplified 'Vancouver style'

All papers submitted for publication should contain the following:

- 1 On page one of the manuscript:
  - a) the title of the article which should be concise but informative and designed to attract the reader. The Editor reserves the right to change titles to achieve these ends.
  - b) names, initials or forenames and academic degrees (if any) of author or authors
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- institution(s) to which the work should be attributed, if any
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### 2 On page two:

- a) an *interesting* abstract or summary of not more than 150 words. Emphasise important and/or new aspects of the article to attract the potential reader. Ensure the abstract contains a statement of the aim, key points and conclusion of the paper. Papers reporting the author's empirical research should contain a structured abstract summarising the research under the headings: objectives; design; setting; patients or participants; interventions; main measurements; results; conclusions. Structured abstracts should not be longer than 250 words.

- b) key (indexing) terms – below the abstract. Provide and identify as such, three to six key words or short phrases that will assist indexers in cross-indexing your article and that may be published with the abstract.

Where appropriate, use terms from the Medical Subject Headings List from *INDEX Medicus*.

### 3 Acknowledgements:

- Acknowledge only persons who have made substantive contributions to the study. Authors are responsible for obtaining written permission from everyone acknowledged by name because readers may infer the latter's endorsement of data and conclusions.

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- Number these consecutively in the order in which they are first mentioned in the text, tables, and captions, by arabic numerals, superscript, no brackets, for example, according to Jones.<sup>3</sup> The list of references at the end of the paper should be numbered in the order in which each reference appears in the text. Try to avoid using abstracts as references. 'Unpublished observations' and 'personal communications' may not be used as references, although references to written, not verbal, communications may be inserted (in parenthesis) in the text. Manuscripts accepted but not yet published may be used as references – designate the journal followed by 'in press' (in parenthesis). Information from manuscripts submitted but not accepted should be cited in the text as 'unpublished observations' (in parenthesis).

Where a further reference is made to a previous reference, but to a different page number or numbers, this should have a new reference number of its own and it should

then refer back to the original reference, thus:

- 1 May T. The nurse under physician authority. *Journal of Medical Ethics* 1993; 19: 223-7.
- 2 See reference 1: 225.

Please note also that the names of journals should be in italics. The volume number should be in bold.

## References must be verified by the author(s) against the original documents.

The following scheme, a simplification of the 'Vancouver style' for biomedical journals, should be followed for each reference: in the text – number in superscript, following punctuation; in the list – author (list all authors if six or less; if seven or more, list only the first six and add '*et al*'), title, name of publication if different from title – in italic; place of publication and publisher (where appropriate); year of publication; and, where appropriate, volume number in bold and page references of article or chapter referred to. Examples of correct forms of reference are given below:

- a) Standard journal article:
  - 1 Teasdale K, Kent G. The use of deception in nursing. *Journal of Medical Ethics* 1995; 21: 77-81.
- b) Corporate author:
  - 2 General Medical Council. *Tomorrow's doctors – recommendations on undergraduate medical education*. London: General Medical Council, 1993.
- c) No author given:
  - 3 Anonymous [editorial]. Anonymous HIV testing. *Lancet* 1990; 335: 575-6.
- d) Personal author(s):
  - 4 Singer P, Kuhse J. *Should the baby live?* Oxford: Oxford University Press, 1985.
- e) Editor, compiler, chairman as author:
  - 5 Phillips CE, Wolfe JN, eds. *Clinical practice and economics*. Tunbridge Wells: Pitman Medical, 1977.
- f) Chapter in book:
  - 6 Hope T. Ethics and psychiatry. In: Rose N, ed. *Essential psychiatry* [2nd ed]. Oxford: Basil Blackwell Scientific Publications, 1994: 45-51.
- g) Agency publication:
  - 7 The Linacre Centre for the Study of Ethics and Health Care. Paper 1: The principle of respect for human life. In: *Prolongation of life*. London: The Linacre Centre for the Study of Ethics and Health Care, 1978.
- h) Newspaper article:
  - 8 Dinwoodie R. Volunteers die as heart drug results baffle doctors. *The Scotsman* 1980 Sept 5: 11 (cols 1-6).

# The Institute of Medical Ethics: research and medical groups

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## Research

Since 1975, the institute has conducted research in many areas of health care ethics and education, including issues related to resource allocation in health care, death and dying, abortion and the treatment of infertility, research with human subjects, and medical involvement in torture. Recent studies have been concerned with

the use of animals in biomedical research, ethical aspects of HIV infection and AIDS, and medical and nursing education. The institute's current research programme includes studies of decision-making in neonatal care and in the care of the elderly. Its research unit, based in Edinburgh, works in collaboration with multidisciplinary

working parties whose membership is drawn from all parts of the United Kingdom. The research unit provides information and advice on current issues in medical ethics to a variety of academic and health care bodies. Reports on the institute's research are regularly published in medical and nursing journals and by the institute.

## Medical groups

### ABERDEEN MEDICAL GROUP

Dr M D McArthur, Department of Medicine for the Elderly, Wood End Hospital, Aberdeen AB9 2YS

### BIRMINGHAM MEDICAL GROUP

Mr R Sawers, Birmingham Maternity Hospital, Queen Elizabeth Medical Centre, Edgbaston, Birmingham B15 2TG

### BRISTOL MEDICAL GROUP

Dr Oliver Russell, Reader in Mental Health, Bristol University, Department of Mental Health, 41 St Michael's Hill, Bristol BS2 8DZ

### DUNDEE MEDICAL GROUP

Mr Paul Preece, Department of Surgery, Ninewells Hospital, Dundee DD1 9SY

### EDINBURGH MEDICAL GROUP

Dr Sarah Cunningham-Burley, Department of Public Health Sciences, Edinburgh University Medical School, Teviot Place, Edinburgh EH8 9AG

### GLASGOW MEDICAL GROUP

Dr E Hillan, Department of Nursing Studies, Glasgow University, Glasgow G12 8QQ

### LEEDS MEDICAL GROUP

Mr Brian Bentley, Principal of the School of Radiography, Belmont Grove, Leeds LS2 9NS

### LEICESTER MEDICAL GROUP

Dr R K McKinley, Department of General Practice, University of Leicester, Leicester General Hospital, Gwendolen Road, Leicester LE5 4PW

### LIVERPOOL MEDICAL GROUP

Department of General Practice, Liverpool University, PO Box 147, Liverpool L69 3BX

### LONDON

#### THE UNITED MEDICAL ETHICS GROUP (GUY'S AND ST THOMAS'S HOSPITALS)

Dr Graham Clayden, Reader in Paediatrics, St Thomas's Hospital, Lambeth Palace Road, London SE1 7EH

#### THE ROYAL FREE ETHICS GROUPS

Dr Margaret Lloyd, Department of Public Health and Primary Care, The Royal Free Hospital School of Medicine, Pond Street, London NW3 2PF

#### ST GEORGE'S MEDICAL GROUP

Dr N Eastman, St George's Hospital Medical School, London SW17 0RE

#### ST MARY'S HOSPITAL ETHICS FORUM

Jane Tessier-Denham, St Mary's Hospital Ethics Forum, St Mary's Hospital Medical School, Praed Street, London W2

### MANCHESTER MEDICAL GROUP

Dr Geoffrey Jessup, 27 Oakwood Lane, Bowden, Altrincham, Cheshire WA14 3DL

### NEWCASTLE MEDICAL GROUP

The Revd Bryan Vernon, Lecturer in the Ethics of Health Care, Newcastle University, Department of Primary Health Care, School of Health Care Sciences, The Medical School, Framlington Place, Newcastle upon Tyne NE2 4HH

### NOTTINGHAM MEDICAL ETHICS GROUP

Dr T C O'Dowd, Department of General Practice, University Hospital and Medical School, Clifton Boulevard, Nottingham NG7 2UH

### SOUTHAMPTON MEDICAL GROUP

The Revd T Pinner, 8 Bassett Close, Southampton SO2 3FP

Medical groups associated with the Institute of Medical Ethics have been established in British university teaching hospitals. Each academic year they arrange programmes of lectures and symposia on issues raised by the practice of medicine which concern other disciplines. Although these programmes are addressed primarily to medical, nursing and other hospital students they are open to all members of the medical, nursing and allied professions. There is no fee for attendance. Lecture lists are available by direct application to the appropriate co-ordinating secretary named above. A stamped addressed A4 envelope would be appreciated.